Revision: HCFA-PM-91-4 (BPD)

AUGUST 1991

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY AC	STATE	PLAN	UNDER	TITLE	XIX	OF	THE	SOCIAL	SECURITY	AC'
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State/Territory: Indiana

Optional Sliding Scale Premiums Imposed on Qualified Disabled and Working Individuals

A. The following method is used to determine the monthly premium imposed on qualified disabled and working individuals covered under section 1902(a)(10)(E)(ii) of the Act:

N/A

B. A description of the billing method used is as follows (include due date for premium payment, notification of the consequences of nonpayment, and notice of procedures for requesting waiver of premium payment):

N/A

*Description provided on attachment.

TN No. 91-20Supersects
TN No. 90-23Approval Date 3-/2-92Effective Date 1-1-92

HCFA ID: 7986E

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Revision: HCFA-PM-91-4 (BPD) AUGUST 1991 Page 2 OMB No.:0938-STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT Indiana State/Territory: _ C. State or local funds under other programs are used to pay for premiums: No D. The criteria used for determining whether the agency will waive payment of a premium because it would cause an undue hardship on an individual are described below:

*Description provided on attachment.

TN No. 91-20 Supersedes TN No. 90-23	Approval Date	3-12-92	Effective Date	1-1-92
			UCEN ID. 70961	₽